#### GRANT APPLICATION FOR WATER MEASUREMENT DEVICES

### **Montana Department of Natural Resources and Conservation**

Private Grant and Loan Program

The Montana legislature has allocated grants for water development activities by private water users. These limited grants are intended for areas where water measurement devices are required by order, or where there is a unified effort by water users to improve local management of water resources. The maximum grant amount is 25% or \$5000 (whichever is less) of the cost of installation of standard, approved water measurement devices for irrigation diversions.

The first step in the grant process is to confirm the eligibility of your proposed project. Complete pages 1 and 2 of this application and return to:

Montana DNRC Water Measurement Program Attn.: Dave Amman P.O. Box 201601 Helena, MT 59620-1601

When your project is approved and installation is completed, complete and return page 3 (Actual Expenses, etc.) along with receipts for labor and materials. Make a copy of your application for your records. Applications will be reviewed and ranked on a basis of need. For eligible applicants, copies of invoices or bills incurred must be received by the DNRC before grant payment can be made. If you have further questions, contact Dave Amman at 444-6648 or email at damman@mt.gov

### **Owner Information**

Name:			-
Address:			
City:	State:	Zip:	
Phone:			
Contact Person:			
Type of Entity (check a	ll that apply):		
AssociationPa	rtnershipCorporation _	PrivateOther	
Estimated Project Start	Date: Estimat	ed Project Completion Date:	
Project Description (ty	ype of device, location, installa	ation specifics, etc.):	
		requirement:	

Water Source:	Mar	or diagram	of head	gate	/ measuring	device	locations	in relati	ion to	source:

# **ESTIMATED Expenses**

Expense Budget:	Proposed Project Funding:	
Labor:	Amount of Grant requested:(cannot exceed 25% total cost)	
Equipment:	Applicant's contribution:	
Materials:	Other funding sources:	
Engineering:		
Other:		
Total Project Cost:	Total Project Funding: (must equal Total Project Cost)	
Expense Budget developed by:		
Source of Cost Estimates:		
I do hereby attest that the information in this application	is true and accurate	
Signature of Owner Date:		

Form Created: 3/05

## PART 2: DNRC Private Grant and Loan Program

(After project installation, complete and return with receipts)

Montana DNRC Attn.: Dave Amman P.O. Box 201601 Helena, MT 59620-1601

## **Owner Information**

Name:	
Address:	
City: State:_	Zip:
Phone:	
Contact Person:	
AC	TUAL Expenses
Expense Budget:	Project Funding:
Labor:	Amount of Grant requested:(cannot exceed 25% total cost)
Equipment:	Applicant's contribution:
Materials:	Other funding sources:
Engineering:	
Other:	
Total Project Cost:	Total Project Funding:(must equal Total Project Cost)
Expense Budget developed by:	
Source of Cost Estimates (if any):I do hereby attest that the information in this a	application is true and accurate
Signature of Owner	Date:
For Department Use Only	
Approved for \$ grant	Not approved for grant
Water Measurement Program	Date
Conservation & Resource Development	Date Form Created: 3/05